

Ontario Influenza Bulletin 2005-2006 Season

SURVEILLANCE WEEK 6 (February 5 - 11, 2006)

This issue of the Ontario Influenza Bulletin provides information on the surveillance period from February 5 - 11, 2006. The analysis for this issue occurred on Thursday February 16, 2006, therefore all data is current to that date.

During week 6 of 2006, influenza activity in Ontario was less compared to that of the previous week. Seven sporadically occurring cases of influenza (5 influenza A, 1 influenza B and 1 unspecified) were reported through iPHIS. No institutional outbreak attributed to influenza was reported. The highest level of influenza activity in Ontario was 'localized activity', reported from Toronto, Southwest and Central West regions. All other regions reported 'sporadic activity'.

Please note that for timely reporting of weekly influenza activity levels, we request all health units submit their influenza activity report form (Appendix C) each Tuesday by 4 p.m. EST. Late activity reports are not included in FluWatch or the Ontario Influenza Bulletin. Your attention to this matter is most appreciated.

For a definition of influenza-like illness (ILI) activity levels and links to websites providing current influenza information from other sources, please refer to the attached Appendix. If you would like to provide feedback on the Bulletin, please contact Shafiq Chowdhury (shafiq.chowdhury@moh.gov.on.ca, 416-327-7807) or Anne-Luise Winter (anne-luise.winter@moh.gov.on.ca, 416-327-7301).

Table 1: Summary of laboratory-confirmed influenza cases (sporadic) and institutional outbreaks, by health region, February 5 - 11, 2006.

	HEALTH REGION							TOTAL
	North West	North East	Eastern	Central East	Toronto	South West	Central West	
Lab-confirmed Influenza cases*								
Influenza A	0	0	0	0	3	0	2	5
Influenza B	0	0	0	0	0	1	0	1
Unspecified †	0	0	1	0	0	0	0	1
Total new cases	0	0	1	0	3	1	2	7
Institutional influenza outbreaks‡	0	0	0	0	0	0	0	0

SOURCE: MOHLTC (iPHIS, Health Unit Reports to PHD, Provincial Appendix D and Appendix E Database)

* Includes reports of sporadically occurring influenza through iPHIS, as well as cases in institutional outbreaks, with dates of onset in the surveillance period.

† Type of influenza, i.e. A vs B, was not specified in iPHIS (i.e. Influenza subtype dropdown menu left blank or reported as "Unspecified").

‡ Laboratory-confirmed outbreaks in institutions during the surveillance period.

Table 2: Confirmed* cases of influenza by health unit & health region, with an episode date† between February 5 - 11, 2006.

Region	Health Unit	Laboratory-Confirmed Influenza			TOTAL
		Influenza A	Influenza B	Unspecified‡	
North West	Northwestern	0	0	0	0
	Thunder Bay District	0	0	0	0
	TOTAL NORTH WEST	0	0	0	0
North East	Algoma	0	0	0	0
	North Bay Parry Sound District	0	0	0	0
	Porcupine	0	0	0	0
	Sudbury & District	0	0	0	0
	Timiskaming	0	0	0	0
	TOTAL NORTH EAST	0	0	0	0
Eastern	Eastern Ontario	0	0	0	0
	Hastings & Prince Edward Counties	0	0	0	0
	Kingston, Frontenac, Lennox & Addington	0	0	0	0
	Leeds, Grenville & Lanark	0	0	1	1
	Ottawa	0	0	0	0
	Kenfrew	0	0	0	0
Central East	TOTAL EASTERN	0	0	1	1
	Durham Region	0	0	0	0
	Haliburton, Kawartha, Pine Ridge District	0	0	0	0
	Peterborough County-City	0	0	0	0
	Simcoe Muskoka District	0	0	0	0
	York Region	0	0	0	0
Toronto	Peel Region	0	0	0	0
	TOTAL CENTRAL EAST	0	0	0	0
	Toronto	3	0	0	3
	TOTAL TORONTO	3	0	0	3
South West	Grey-Bruce	0	0	0	0
	Elgin-St. Thomas	0	0	0	0
	Huron County	0	0	0	0
	Chatham-Kent	0	0	0	0
	Lambton	0	0	0	0
	Middlesex-London	0	1	0	1
Central West	Oxford	0	0	0	0
	Perth District	0	0	0	0
	Windsor-Essex County	0	0	0	0
	TOTAL SOUTHWEST	0	1	0	1
	Brant	0	0	0	0
	Haldimand-Norfolk	0	0	0	0
Central West	Hamilton	2	0	0	2
	Niagara Region	0	0	0	0
	Halton Region	0	0	0	0
	Waterloo Region	0	0	0	0
	Wellington-Dufferin-Guelph	0	0	0	0
	TOTAL CENTRAL WEST	2	0	0	2
TOTAL ONTARIO		5	1	1	7

SOURCE: MOHLTC (iPHIS, Health Unit Reports to PHD)

* Confirmed cases of influenza can include laboratory-confirmed cases and epi-linked cases.

† Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

‡ Type of influenza, i.e. A vs B, was not specified in iPHIS (i.e. Influenza subtype dropdown menu left blank or reported as unspecified)

Table 3: Cumulative* confirmed† cases of influenza by health unit & health region, September 1, 2005 to February 11, 2006.

Region	Health Unit	Laboratory-Confirmed Influenza			TOTAL
		Influenza A	Influenza B	Unspecified‡	
North West	Northwestern	0	1	0	1
	Thunder Bay District	0	0	0	0
	TOTAL NORTH WEST	0	1	0	1
North East	Algoma	0	0	0	0
	North Bay Parry Sound District	0	0	0	0
	Porcupine	0	1	0	1
	Sudbury & District	1	0	0	1
	Timiskaming	0	0	0	0
	TOTAL NORTH EAST	1	1	0	2
Eastern	Eastern Ontario	0	0	0	0
	Hastings & Prince Edward Counties	1	0	0	1
	Kingston, Frontenac, Lennox & Addington	3	0	0	3
	Leeds, Grenville & Lanark	1	0	3	4
	Ottawa	1	0	0	1
	Renfrew	3	0	0	3
	TOTAL EASTERN	9	0	3	12
Central East	Durham Region	0	0	0	0
	Haliburton, Kawartha, Pine Ridge District	4	0	0	4
	Peterborough County-City	0	0	1	1
	Simcoe Muskoka District	4	0	0	4
	York Region	3	3	0	6
	Peel Region	3	0	0	3
	TOTAL CENTRAL EAST	14	3	1	18
Toronto	Toronto	17	4	0	21
	TOTAL TORONTO	17	4	0	21
South West	Grey-Bruce	0	0	0	0
	Elgin-St. Thomas	1	0	0	1
	Huron County	2	0	0	2
	Chatham-Kent	0	0	1	1
	Lambton	0	0	0	0
	Middlesex-London	3	2	0	5
	Oxford	0	0	0	0
	Perth District	1	1	0	2
	Windsor-Essex County	2	0	0	2
	TOTAL SOUTHWEST	9	3	1	13
Central West	Brant	0	0	0	0
	Haldimand-Norfolk	0	0	1	1
	Hamilton	13	3	0	16
	Niagara Region	3	0	0	3
	Halton Region	6	1	0	7
	Waterloo Region	7	1	0	8
	Wellington-Dufferin-Guelph	0	0	1	1
	TOTAL CENTRAL WEST	29	5	2	36
TOTAL ONTARIO		79	17	7	103

SOURCE: MOHLTC [iPHIS, Health Unit Reports to PHD]

* Cumulative case counts include late reports and records that are otherwise reconciled. Therefore, cumulative counts may not equal new cases plus previous cumulative value.

† Confirmed cases of influenza can include laboratory-confirmed cases and epi-linked cases.

‡ Type of influenza, i.e. A vs B, was not specified in iPHIS (i.e. Influenza subtype dropdown menu left blank or reported as unspecified)

Influenza Subtype(s):

During Week 6, 2,810 isolates were received by the Public Health Agency of Canada, with a total of 161 and 126 testing positive for influenza A and B respectively. The majority of the influenza A isolates (58) were from Alberta (36.0%), British Columbia 36 (22.4%), Saskatchewan 28 (17.4%) and Ontario 23 (14.3%). The majority of the influenza B isolates (49) were from Alberta (38.9%), Saskatchewan 33 (26.2%), British Columbia 32 (25.4%) and Ontario 7 (5.6%).*

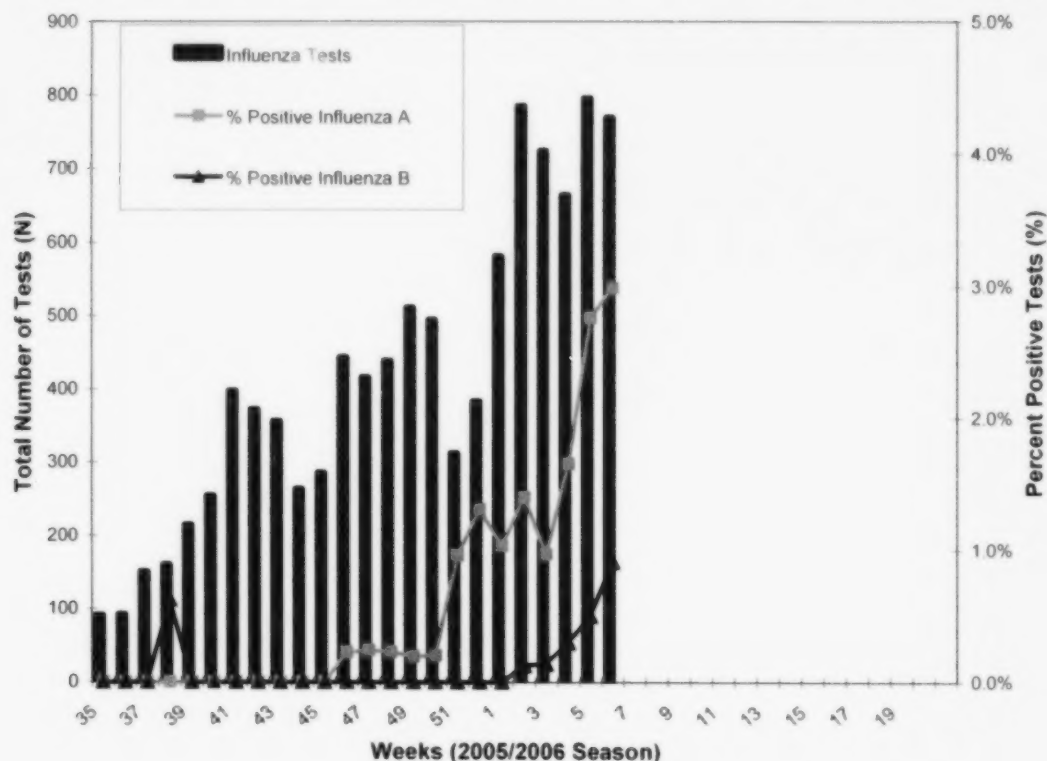
Since the start of the 2005-2006 influenza season, the National Microbiology Laboratory (NML) has antigenically characterized 211 influenza viruses: 122 A/California/07/2004(H3N2)-like viruses (66 in British Columbia, 18 in Alberta, 7 in Saskatchewan, 1 in Manitoba, 29 in Ontario & 1 in Quebec); 2 A/New Caledonia/20/1999(H1N1)-like viruses (in Ontario & Quebec); 84 B/Hong Kong/330/2001-like viruses (1 in the Northwest Territories, 5 in the Yukon, 15 in British Columbia, 49 in Alberta, 9 in Saskatchewan, 3 in Ontario & 2 in Quebec) belonging to the B/Victoria/2/1987 lineage; and 3 B/Shanghai/361/2002-like viruses (in British Columbia, Alberta & Ontario) belonging to the B/Yamagata/16/1988 lineage.**

Note: The 2005-2006 season Canadian vaccine contains an A/New Caledonia/20/1999(H1N1)-like, an A/California/7/2004(H3N2)-like, and a B/Shanghai/361/2002-like virus strain.

* These data have been obtained from the Respiratory Virus Detection table of Public Health Agency of Canada for week 6, 2006

** These data have been obtained from the FluWatch report of the Public Health Agency of Canada for week 5, (Jan. 29- Feb 4) 2006

Figure 1: Total number of influenza tests performed and percent of positive tests in Ontario reported to the Centre for Infectious Disease Prevention and Control (CIDPC), by report week.



Source: Public Health Agency of Canada

* Total numbers reported include late reports; therefore totals may not be equal to the sum of the weekly numbers.

Note: Cumulative numbers for season to date are available through FluWatch:
<http://www.phac-aspc.gc.ca/fluwatch/>

Table 4: Institutional respiratory outbreaks in Ontario, September 1, 2005 to February 11, 2006

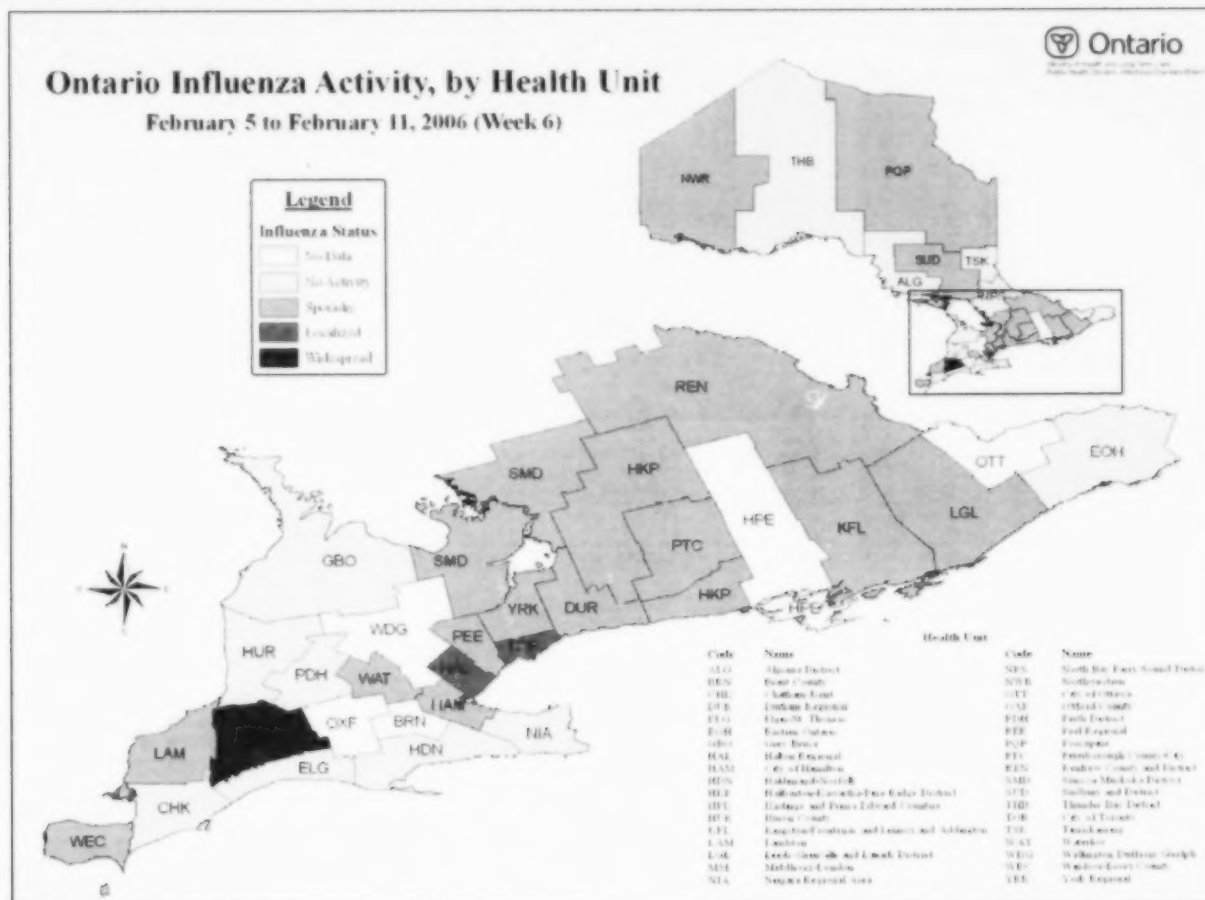
Institutional Respiratory Infection Outbreaks		
New Outbreaks*	N	% (of outbreaks)
Influenza A	0	0.0
Influenza B	0	0.0
Influenza A and B	0	0.0
Parainfluenza (All types)	0	0.0
Other organisms	0	0.0
No organism identified	23	100.0
TOTAL	23	100.0
Total Respiratory Infection Outbreaks, Season to Date**	N	% (of outbreaks)
Influenza A	12	3.2
Influenza B	0	0.0
Influenza A and B	0	0.0
Parainfluenza (All types)	27	7.2
Other organisms	60	16.0
No organism identified	276	73.6
TOTAL	375	100
Types of Institutions (All Outbreaks)	N	% (of outbreaks)
Long-Term Care Homes	315	84.0
Hospitals	16	4.3
Retirement Homes	40	10.7
Other	4	1.0
TOTAL	375	100
Outbreak Related Complications (All Outbreaks)	N	% (of cases)
Deaths		
Residents	103	2.5
Staff	0	0.0
Pneumonia (Chest x-ray confirmed)		
Residents	184	4.5
Staff	9	0.6
Hospitalizations		
Residents	220	5.4
Staff	2	0.1

SOURCE: MOHLTC [Provincial Appendix D and Appendix E Database]

** Season to date includes all outbreaks in which the date of onset of the first case occurred between September 1, 2005 and February 4, 2006.

* New outbreaks are those in which the date of onset of the first case occurred in the current surveillance period (February 5 to 11, 2006).

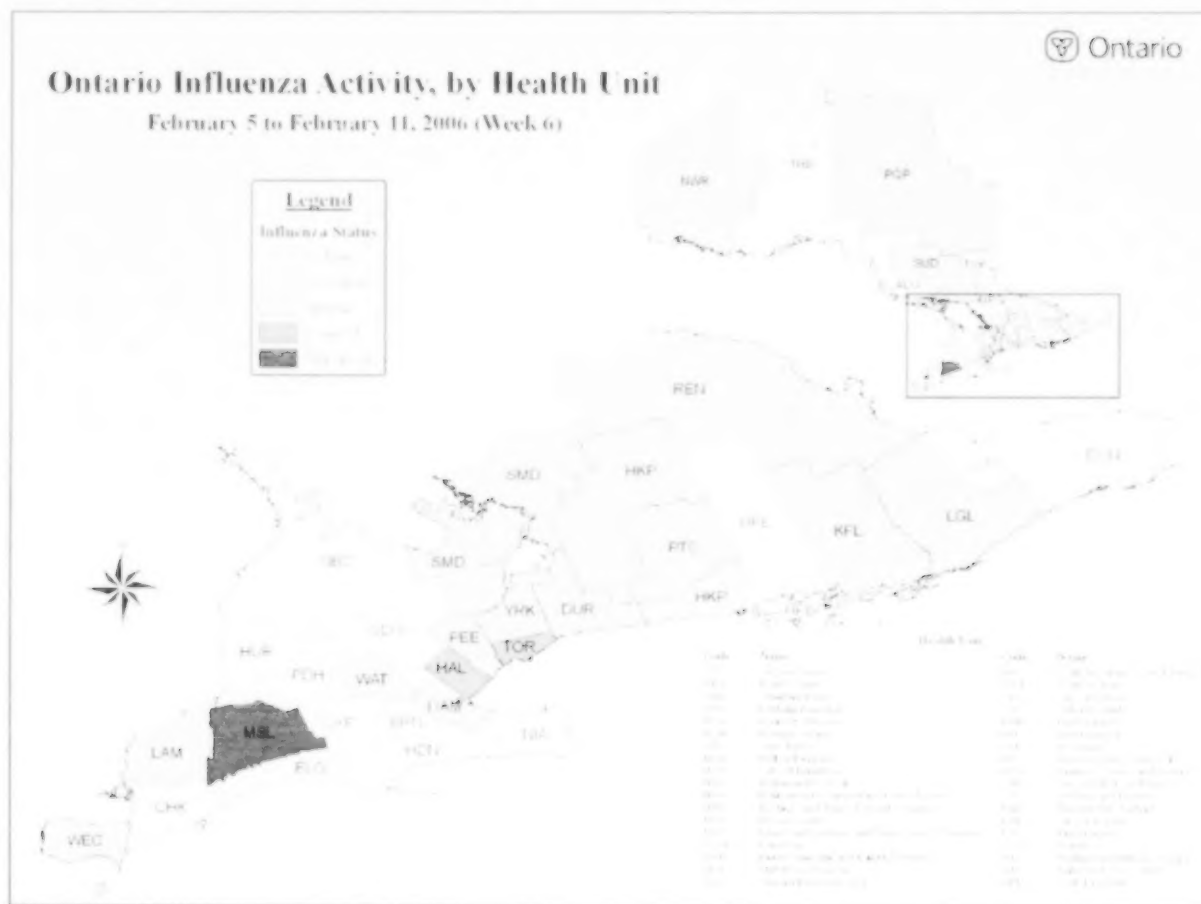
Figure 2: Influenza activity* in Ontario by health unit, Week 6 (February 5 - 11, 2006).



SOURCE: MOHLTC [Provincial Influenza Activity Report (Appendix C) Database]

* Influenza activity levels, as represented on this map, are assigned by local public health units and reported to the MOHLTC by the Tuesday following the end of the surveillance week at 4 pm. Activity levels are assigned based on laboratory confirmations, ILI reports from various sources, and laboratory-confirmed institutional outbreaks. Please refer to detailed definitions for the 2005-2006 season included in the Appendix.

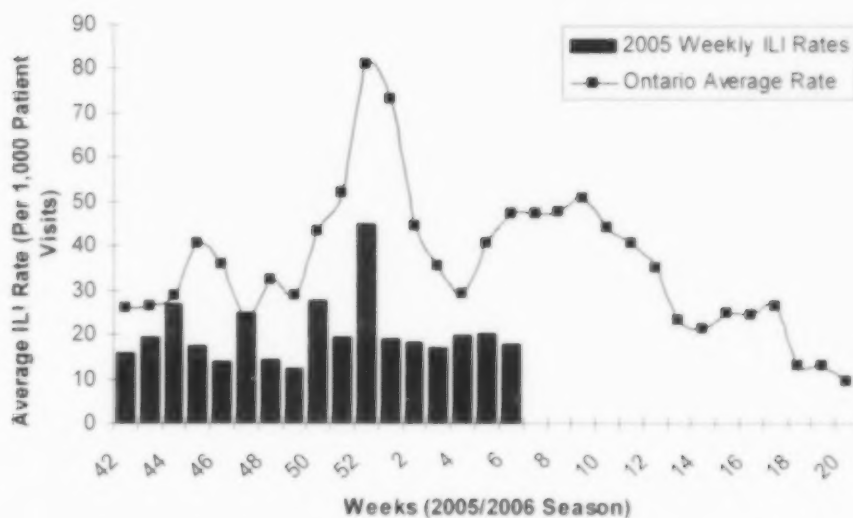
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Figure 3: Average influenza-like illness consultation rate (per 1,000 patient visits) reported by sentinel physicians* in Ontario in 2005-2006 season, by report week, Compared to Ontario average† (1996/96 to 2004/05 seasons).



Source: Public Health Agency of Canada

* Sentinel physician information is reported to Public Health Agency of Canada.

† No data available for mean rate in previous years for weeks 21 to 39 (1996-1997 through 2002-2003 seasons). During weeks 20-39, 2002-2003/2004-2005 seasons, ILI is reported once every two weeks, on even weeks only.

Table 5: Average Influenza-like illness consultation rate (per 1,000 patient visits) reported by Sentinel Physicians* in Ontario, by age group and postal code for week 6, 2006.

Postal Code	0 - 4	5 - 19	20 - 64	65 +	Unknown
K0C1A0	0	0	0	0	0
K2P1V3	0	0	1	0	0
K1J9M2	0	0	0	0	0
K2P1V3	0	0	1	0	0
K0H2N0	1	0	1	0	0
K7H2W6	0	0	0	0	0
K7L1E9	0	0	0	0	0
K0L1C0	0	0	0	0	0
K0K1H0	0	0	2	0	0
K0L1H0	0	0	0	0	0
K0M1A0	0	0	0	0	0
L1B1H8	0	0	0	0	0
L4L4Y7	0	0	1	0	0
L4J7Y3	0	0	0	0	0
L4G3W3	0	0	0	0	0
M5M1B2	0	2	0	0	0
M4X1W4	0	0	0	0	0
M6G4A1	0	0	0	0	0
M4E1V8	0	0	0	0	0
M8Y1W3	0	0	0	0	0
M2J2Z1	0	0	0	0	0
M3H1T1	0	0	0	0	0
M2K1E1	0	0	0	0	0
M9W6N5	0	0	0	0	0
M9W4L6	2	1	0	0	0
L4Y2N8	0	0	0	1	0
L6V4H6	0	0	2	0	0
L9W1G2	0	0	0	0	0
L9H1V1	0	0	0	0	0
L9H2G2	0	0	0	0	0
L0R1H0	0	0	0	0	0
L2E1Y3	0	0	0	0	0
N3C2E2	0	0	0	0	0
N2C1P2	0	0	0	0	0
N2M3B5	1	0	1	0	0
M5H1K9	0	0	0	0	0
N0R1G0	0	0	0	0	0
N8X2G3	1	0	1	0	0
N0M1T0	0	1	0	0	0
N6C2R5	0	0	0	0	0
N0G1L0	0	0	0	0	0
K0J1B0	0	0	0	0	0
P0H2H0	0	0	0	0	0
P0A1C0	0	0	0	0	0
P0P1S0	0	0	0	0	0
P3E5V5	0	0	0	0	0
P4N1C6	0	0	0	0	0
P6B1Y5	2	0	0	0	0
P7E1H5	0	0	0	0	0
P0T2E0	0	0	1	0	0
P0W1E0	0	0	0	0	0
P9N3W7	0	0	0	0	0
P8N2Z6	1	0	0	0	0
ILI Sum	8	4	11	1	0
ILI Consultation Rate (per 1,000 patient visits)	89.9	30.8	13.5	3.1	0.0

Source: Public Health Agency of Canada

* Sentinel physician information is reported to the Public Health Agency of Canada

Note: The small numbers of sentinel physicians reporting at the local level make the ILI rates unstable. Please interpret these data correspondingly.

FURTHER INFORMATION

1. Ontario Ministry of Health and Long-Term Care
Previous issues of the Ontario Influenza Bulletin can be accessed at:
www.health.gov.on.ca/english/providers/program/pubhealth/flu/flu_04/flu_bul_mn.html
2. Public Health Agency of Canada
Issues of FluWatch can be accessed at:
www.phac-aspc.gc.ca/fluwatch/
3. United States Centers for Disease Control and Prevention
www.cdc.gov/flu/

APPENDIX

Definitions for influenza activity levels:

No Data: No activity report corresponding to the surveillance week was received at the Ministry of Health and Long-Term Care Call Centre by the Tuesday (at 4 p.m.) following the end of the surveillance period.

No Activity = No ILI and no laboratory-confirmed cases* or outbreaks occurred.

Sporadic: sporadically occurring ILI **AND** laboratory-confirmed influenza* with NO outbreaks detected within the influenza surveillance region†

Localized: sporadically occurring ILI **AND** laboratory-confirmed influenza* together with outbreaks of ILI in schools and worksites or laboratory confirmed influenza in residential institutions occurring in less than 50% of the influenza surveillance region(s)

Widespread: sporadically occurring ILI **AND** laboratory-confirmed influenza* together with outbreaks of ILI in schools and worksites or laboratory-confirmed influenza in residential institutions occurring in greater than or equal to 50% of the influenza surveillance region(s)

* Confirmation of influenza within the surveillance region at any time within the prior four weeks

† Sub-regions within the province or territory as defined by the provincial/territorial epidemiologist

Influenza-Like Illness (ILI) Definitions:

A) ILI in the general population:

Acute onset of respiratory illness with fever and cough and with one or more of the following - sore throat, arthralgia, myalgia, or prostration which could be due to influenza virus. In children under 5, gastrointestinal symptoms may also be present. In patients under 5 or 65 and older, fever may not be prominent.

B) ILI/Influenza outbreaks:

Schools and work sites: greater than 10% absenteeism on any day most likely due to ILI **Residential institutions:** two or more cases of ILI within a seven-day period, including at least one laboratory-confirmed case.

